

## REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

IS THIS AN AMENDMENT? Yes X No

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

(CFA-4) **Summary Sheet** 

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

	001111			<u>-                                      </u>				
1. Full Name of Committee (or an Other	COMMITTEE INFORMATION							
Full Name of Committee (as on Statement of Organization     Committee to Floot Gross Closure	Check if this is a new n	ame						
Committee to Elect Greg O'Connor								
2. Acronym or Abbreviated Name (if any)			3. Committee Telephone Number					
4 Mailing Addross (address to 11			317 ) 418-7598					
4. Mailing Address (address where all campaign finance correspondence is received)  Check if this is a new address								
610 Wordsworth 5. City, State, ZIP Code								
S. City, State, ZIP Code  6. Pa  Noblesville, IN 46060			y Affiliation (if applicable)					
Re			publican					
CANDIDATE INFORMATION (For Candidate's Committees Only)								
Gregory B. O'Connection (include any nickname)  8. Par			y Affiliation or If Independent Candidate					
Repub			ican					
9. Office Sought (Include district number, if any. Not required for exploratory committee.)  10. Co			County of Residence					
Noblesville City Council District #5								
TVPE OF F								
TYPE OF REPORT  11. Check one:			CONVENT	TION CANDIDATES ONLY				
Pre-Primary Pre-Election X Annual Nomination Other			Check one:					
Final/Dishands Committee (licentity of the control			Pre-Convention					
Final/Disbands Committee (lines 18, 19, and 20 must be '0') Outgoing Treasurer (within 10 days amend Statement of Organization)  12. Reporting Period:								
Emm. January J. Doop	COLUMN A	COLUMN B						
From: January 1, 2009 Through: December 31, 2009			This Period	Year to Date				
13. Cash on hand and investments at the beginning of this reporting period.			5637.35					
14. Cash on hand and investments January 1, current year.  CONTRIBUTIONS AND			5637.35					
(Note: these amounts include in-kind contributions and loans	S as well as each contributions							
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)  15a. Itemized (use Schedule A)			0.00					
15b. Unitemized			0.00	0.00				
15c. Add lines 15a and 15b in both columns			0.00	0.00				
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B			0.00	0.00				
EXPENDITURES  TO			5637.35	5637.35				
(Note: These amounts include in-kind expenditures and loan repayments.)  17a. Itemized (use Schedule B) (Public Question: use Schedule C)								
17b. Unitemized			0.00	0.00				
17c Add lines 17c and 47c in his			0.00	0.00				
			0.00	0.00				
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)  TOTAL			5637.35	5637.35				
19. Debts OWED BY the committee (use Schedule D)			817.68					
20. Debts OWED TO the committee (use Schedule E)								
	TIFICATION			EOD OFFICE HOP ONE				
FOR OFFICE USE ON  OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.								
Till_			Date (1)					
Treasurer 1-								
			Date / 12/10	:E yed 51 VF 910				
4			1 /13/10 E	AND SECTION AND ALCOHOLOGY				



## (CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

FILE NUMBER						
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CREDITOR'S OR LENDER'S NAME 8 MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS of anyoustreat, number only, state, ZIP code,	AMOUNT  NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD	
Gregory P. O'Connor 610 Wordsworth Court Noblesville, IN 46060					817.68	
LENDER'S OCCUPATION: Banker/Loan Officer						
LENDER'S OCCUPATION:						
LENDER'S OCCUPATION:						
LENDER'S OCCUPATION:						
LENDER'S OCCUPATION:						
					<del></del>	
LENDER'S OCCUPATION:						
LENDER'S OCCUPATION:						
SUBTOTAL THIS PAGE OF SCHEDULE D						
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet)						